Checklist for the Prescribing of Opioids for the Management or Treatment of Pain  Excludes cancer and terminal pain and does not apply to the supervised administration of opioids in a health care setting.			
Pati	Patient name & date		
For	AL	<u>L</u> Pain (Acute and Chronic)	
		Documented history and physical	
		Complete Board approved risk assessment tool to determine patient appropriateness for opioids	
		Treatment Plan that includes consideration of nonpharmacological modalities and non-opioid options for pain	
		Lowest effective dose for fewest number of days	
		Informed Consent outlining risks and benefits of opioid use	
		Query the NH PDMP* (Prescription Drug Monitoring Program) Initial script: (date)	
		Prescriber may want to print the PDMP query results/screen shot for the medical record	
		ceptions for PDMP use: Controlled Rx <i>administered</i> to patient; PDMP inaccessible due to electronic issue; or ED with a patient volume such that querying the PDMP would create a delay in care.	
Αсι	ıte	Pain	
		Document opioid prescription and rationale	
		Prescription limited to 7 days when issued in emergency dept., urgent care or walk-in clinic	
		For unresolved acute pain where continuity of care is anticipated: No obligation to prescribe opioids for	
		more than 30 days; however, if unresolved acute pain persists beyond 30 days, requires an in-office,	
		follow-up appointment prior to issuing a new script.  (date)	
Chr	oni	ic Pain	
		Written Treatment Agreement **	
		Consideration of pain consultation for patients receiving 100mg morphine equivalent daily dose > 90 days	
		Reevaluate Treatment Plan and use of opioids at least twice per year: (date) (date)	
		Re-check PDMP, at least twice per year: (date) (date)	
		Urine Drug Screens ** at least annually for patients taking opioids > 90 days: (date) (date)	

\*\* Not required for patients in long-term, non-rehab facility when opioid is administered <u>or</u> for patients with episodic

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intermittent pain receiving no more than 50 dose units in a 3 month period.